

Company Name: _____

Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Telephone Number: _____ Fax Number: _____

Number of Participants: _____

Name of Participant	Phone Number	Email Address

Course Name: _____

Date of Course: _____

Amount due: \$250 x _____ (# of participants) = \$ _____ **Total Due (plus applicable taxes)**

Method of Payment (check one):

Cheque enclosed – Please mail this form with cheque to:

Thinkage Ltd
85 McIntyre Drive
Kitchener, Ontario N2R 1H6 Canada

Credit Card – Please fax this completed form to 519-895-1864

Check one: Visa Master Card American Express

Name of Credit Card Holder: _____

Credit Card Number: _____

Expiry: _____ / _____

Billing Address: _____

Purchase order – Please fax this completed form to 519-895-1864. If possible, attach a copy of the actual purchase order. Note: this form of payment is only available to existing MainBoss customers.

Purchase Order Number: _____

Authorized Signature: _____